

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3		1				
4		1				
5		4				
6		4				
7		4				
8		4				
9		4				
10		4				
11	1	4	1			
12		4	1			
13		4		1		
14		4		1		
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47						
48						
49						
50						
TOTAL IND.	2		2			
TOTAL DEP.	12		2			
TOTAL CLAIMS	14		4			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS